

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Water Disposal Well	WELL API NO. 30-007-20116
	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator ARP Company, LLC	6. State Oil & Gas Lease No.
3. Address of Operator PO Box 190, Raton NM, 87740	7. Lease Name or Unit Agreement Name VPR A
4. Well Location Unit Letter <u>B</u> : <u>1073.86</u> feet from the <u>North</u> line and <u>2275.90</u> feet from the <u>East</u> line Section <u>NENE</u> <u>01</u> Township <u>31N</u> Range <u>19E</u> NMPM Colfax County	8. Well Number 007 WDW
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 8275'	9. OGRID Number 180514
	10. Pool name or Wildcat

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Did a MIT test on 3/13/2014, held 510# of pressure for 25 min

Spud Date: Rig Release Date:

REC'D
 700 MAR 18 P 10:21

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

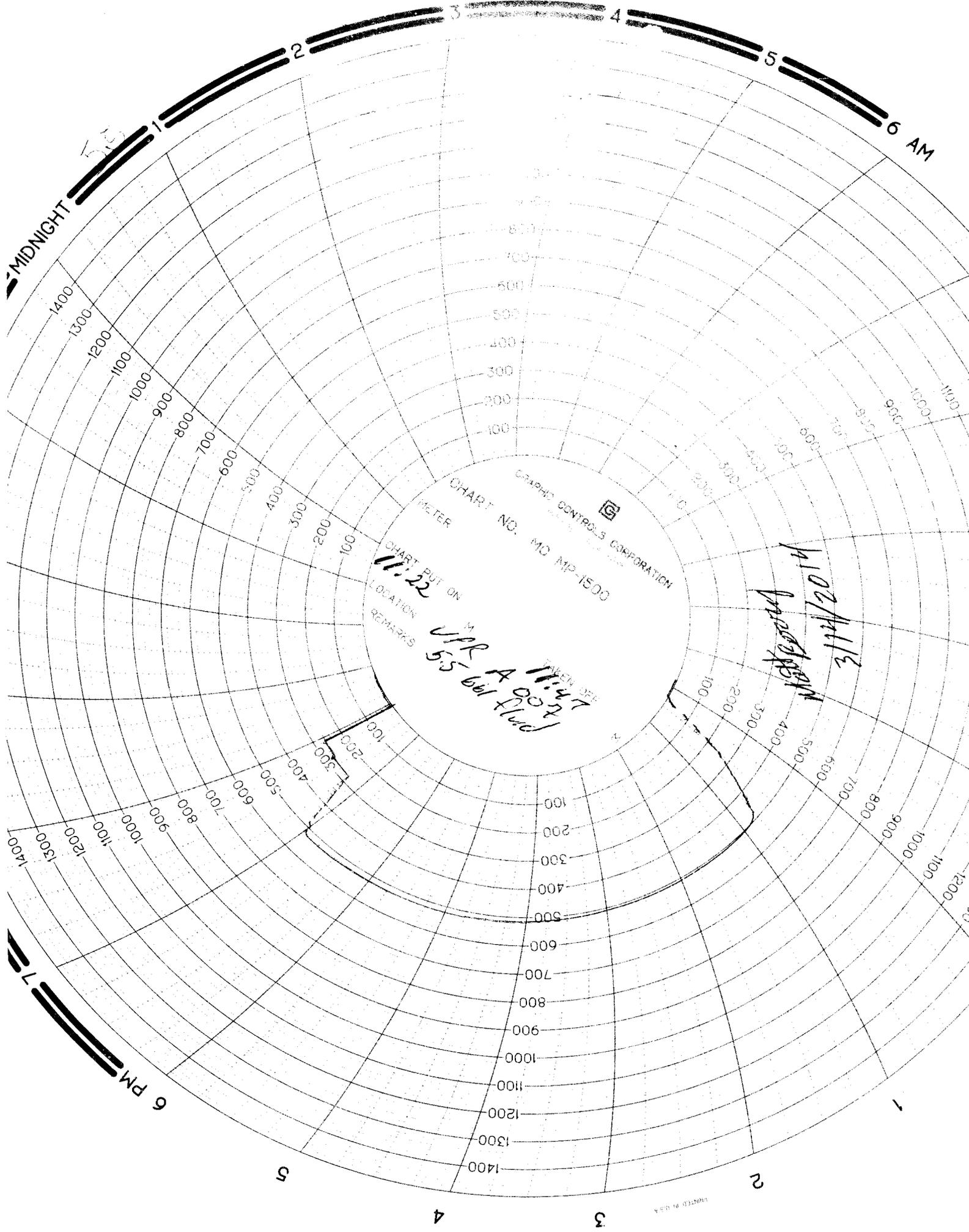
SIGNATURE Matt Berry TITLE Production Foreman DATE 3/14/2014
 Type or print name Matt Berry E-mail address: mberry@atlasenergy.com PHONE: (575)445-6785

For State Use Only

APPROVED BY: Ed Martin TITLE **DISTRICT SUPERVISOR** DATE 3/21/2014
 Conditions of Approval (if any):

MIDNIGHT

6 AM



GRAPHIC CONTROLS CORPORATION
 CHART NO. MD MP-1500
 METER

CHART PUT ON
 11:22
 LOCATION
 REMARKS

TAKEN OFF
 11:27
 VPR A 002
 5.5 gal fluid

W. J. [unclear]
 3/12/2014

6 PM

7

5

4

3

2

1

REGISTERED IN U.S.A.